

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Michael J. Heller et al.
 Serial No. : 09/358,788 Examiner: Betty Forman
 Filed : July 22, 1999 Group Art Unit: 1634
 For : METHOD FOR THE ELECTRONIC ANALYSIS OF A SAMPLE
OLIGONUCLEOTIDE SEQUENCE

COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Date: February 21, 2012

Sir:

Transmitted herewith is an amendment to the above-identified application.

_____ Small entity status of this application under 37
 C.F.R. \$1.9 and \$1.27 has been
 previously-established.

_____ A verified statement to establish small entity
 status under 37 C.F.R. \$1.9 and \$1.27 is enclosed.

_____ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amend- ment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	7	* 20 =	*** 0 X	\$30	\$60	0	
Indepen- dent Claims	2	** 3 =	*** 0 X	\$125	\$250	0	
Multiple Dependent Claim(s) Presented For First Time _____ Yes <u>X</u> No				\$225	\$450	0	
				TOTAL ADDITIONAL FEE \$ 0			

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".

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The following are also enclosed:

_____ One additional copy of this Amendment Transmittal Letter

_____ Return Receipt Postcard

_____ An Information Disclosure Statement, including Form PTO-144 9

(Copies of citations included: Yes _____ No _____

and a fee of \$ _____ included)

X A Petition for an Extension of Time, including a fee of
\$ 75 for a Petition for 1 Month(s) Extension of Time

X Other (identify): Request for Continued Examination (\$465.00)

THE TOTAL FEE DUE IS \$540.00.

_____ A check in the amount of \$ _____ is enclosed.

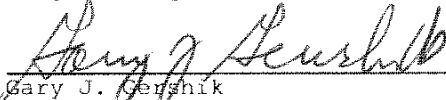
X Please charge Deposit Account No. 03-3125 in the amount of
\$540.00.

X The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125 as
follows:

X Fees under 37 C.F.R. \$1.16 for the presentation of extra claims

_____ Patent application processing fees under 37 C.F.R. \$1.17

Respectfully submitted,


Gary J. Gersnik

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Certificate of Transmission

I hereby certify that this correspondence
is being transmitted via the Electronic
Filing System (EFS) to the U.S. Patent and
Trademark Office on February 21, 2012.


Philip P. Alfano Date